MEDICAL FITNESS STANDARDS FOR

AIRBORNE TRAINING AND DUTY

Section I. GENERAL

7-1. Scope

This chapter sets forth medical conditions and physical defects which are causes for rejection for ---

- a. Airborne training and duty, ranger training and duty, and special forces training and duty.
 - b. Army service schools.
 - c. Diving training and duty.
 - d. Enlisted military occupational specialties.
 - e. Geographical area assignments.
 - f. Service academies other than the U.S. Military Academy.

7-2. Applicability

These standards apply to all applicants or individuals under consideration for selection or retention in these programs, assignments, or duties.

- Section II. MEDICAL FIGURES STANDARDS FOR AIRBORNE TRAINING AND DUTY, RANGER TRAINING AND DUTY, AND SPECIAL FORCES TRAINING AND DUTY
- 7-3. Medical Fitness Standards, for Initial Selection for Airborne Freining, Ranger Training, and Special Forces Training

The causes of medical unfitness for initial selection for airborne training, ranger training, and special forces training are all the causes listed in chapter 2, plus all the causes listed in this section.

- a. Abdomen and gastrointestinal system.
 - (1) Paragraph 2-3.

(2) Hernia of any variety.

(3) Operation for relief of intestinal adhesions at any time.

Laparotomy within a 6-month period.

- Chronic or recurrent gastrointestinal disorder.
- Blood and blood-founding tiesus diseases.

Peregraph 2-4.

- (2) Sickle cell trait or sickle cell disease.
- c. Dental. Paragraph 2-5.
- Here and hearing.
 - (1) Peregraphs 2-6 and 2-7.

Radical mastoidectomy.

Any infectious process of the ear until completely healed. Marked retraction of the tempenic membrane if mobility is Approved_FobRejease_2001HQ8H08: CIA-RDP18:03581R00026001011995

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- (5) Recurrent or persistent tinnitus.
 (6) History of attacks of vertigo, with or without nausea, vomiting, deafness, or tinnitus.
- e. Endocrine and metabolic diseases. Paragraph 2-8.
- f. Extremities.
 - (1) Paragraphs 2-9, 2-10, and 2-11.
 - (2) Less than full strength and range of motion of all joints.
 - (3) Loss of any digit from either hand.
 - (4) Deformity or pain from old fracture.
 - 5) Instability of any degree of major joints.
 - (6) Poor grasping power in either hand.
 - 7) Locking of a knee joint at any time.
 - (8) Pain in a weight bearing joint.
- g. Eyes and vision.
 - (1) Paragraphs 2-12 and 2-13 with exceptions noted below.
 - 2) Distant visual acuity.
 - (a) Airborne training. Uncorrected less than 20/200 in each eye not correctable to 20/20 in each eye.
 - (b) Ranger training. Uncorrected less than 20/200 in each eye not correctable to 20/20 in each eye.
 - (c) Special forces training. Uncorrected less than 20/200 in each eye or not correctable to 20/20 in each eye.
 - (3) Color vision. Failure to identify red and/or green as projected by the Ophthalmological Projector (Federal Stock No. 6515-388-3600) or Armed Forces Vision Tester (Federal Stock No. 6515-299-8084) equipped with Bausch and Lomb Orthorater, Slide No. 71-21-21. (No requirement for ranger training.)
- h. Genitourinary system. Paragraphs 2-14 and 2-15.
- i. Head and neck.
 - (1) Paragraphs 2-16 and 2-17.
 - (2) Loss of bony substance of the skull.
 - (3) Persistent neuralgia; tic douloureux; facial paralysis.
 - (4) A history of subgrachnoid henorrhage.
- j. Heart and vasculer system. Paragraphs 2-18, 2-19, and 2-20.
- k. Height. No special requirement.
- 1. Weight. No special requirement.
- m. Body build. Peregraph 2-23.
- n. Lungs and chest wall.
 - (1) Paragraphs 2-24, 2-25, and 2-26.

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- (2) Spontaneous pneumothorax except a single instance of apontaneous pneumothorax if clinical evaluation shows complete recovery with full expansion of the lung, normal pulmonary function, and no additional lung pathology or other contraindication to flying if discovered and the incident of spontaneous pneumothorax has not occurred within the preceding 3 months.
- o. Mouth, nose, pharynx, larynx, traches, and esophagus. Paragraphs 2-27, 2-28, 2-29, and 2-30.
 - p. Neurological disorders.

(1) Paragraph 2-31.

(2) Active disease of the nervous system of any type.

(3) Craniocerebral injury (para. 4-23a(7)).

q. Psychoses, psychoneuroses, and personality disorders.

(1) Paragraphs 2-32, 2-33, and 2-34.

(2) Evidence of excessive anxiety, tenseness, or emotional instability.

(3) Fear of flying as a manifestation of psychiatric illness.

- (4) Abnormal emotional responses to situations of stress (both combat and noncombat) when in the opinion of the medical examiner such reactions will interfere with the efficient and safe performance of the individual's duties.
- r. Skin and cellular tissues. Paragraph 2-35.
- s. Spine, scapulae, and sacroiliac joints.

(1) Paragraphs 2-36, 2-37, and a above.

(2) Scoliosis: lateral deviation of tips of vertebral spinous processes more than one inch.

(3) Spondylolysis, spondylolisthesis.

(4) Healed fractures or dislocations of the vertebrae.

- (5) Lumbosacral or sacroiliac strain, or any history of a disabling episode of back pain, especially when associated with significant objective findings.
- t. Systemic diseases and miscellaneous conditions and defects.
 - (1) Paragraphs 2-38 and 2-39.

(2) Chronic motion sickness.

- (3) Individuals who are under treatment with any of the moodomeliorating, tranquilizing, or attractic drugs and for a period of 4 weeks after the drug has been discontinued.
- (4) Any severe illness, operation, injury, or defect of such a nature or of so recent occurrence as to constitute an undue hazard to the individual.
- u. Tomors and malignant diseases. Paragraphs 2-40 and 2-41.
- v. Venereal diseases. Paragraph 2-42.

Approved For Release 2001/08/08 : CIA-RDP78-03581R000200010119-5

7-4. Medical Fitness Standards for Retention for Airborne Duty, Ranger Duty, and Special Forces Duty

Retention of an individual in airborne duty, ranger duty, and special forces duty will be based on-

- a. His continued demonstrated ability to perform satisfactorily his duty as an airborne officer or enlisted man, ranger, or special forces member.
- b. The effect upon the individual's health and well-being by remaining on airborne duty, in ranger duty, or in special forces duty.